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PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # P93000068366

1. Corporation Name

Mailing Address	
7037 COLFAX DR. PORT RICHEY FL 34668	
	7037 COLFAX DR.

FILED Feb 20, 1999 8:00 am Secretary of State

02-20-1999 90113 046 ***150.00

	CCARTY & SONS, INC.						
Principal Place	e of Business	Mailing Address					
7037 COLFAX (7037 COLFAX DR.			1		
PORT RICHEY FL 34668 PORT RICHEY FL 34668			DO NOT WRITE IN THIS SPACE				
					3. Date Incorporated or Qualifed		
					09/27/1993		
2. Principal P	Place of Business	2a. Mailing Address			4. FEI Number		Applied For
21		26			59-3205331		Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.	·		5Certifcate of Status Desired		5 Additional Required
22 City & Stat	to	City & State	_		6. Election Campaign Financing		00 May Be
23	ic.	28			Trust Fund Contribution		ed to Fees
Zip	Country	Zip	Country		8. This corporation owes the current year	ar Intangiþle	
24	25	29 30			Personal Property Tax.	Yes	N₀
	9. Name and Address of Curren	t Registered Agent			10. Name and Address of New Registe	ered Agent	
	ADTV CHIDIEV		81	Name			
	CARTY, SHIRLEY		82	Street Add	dress (P.O. Box Number is Not Acceptable)	-	
	7 Colfax dr. Rt Richey fl 34668					_	
POR	(I RICHE) FL 34000		83				
			84	City		FL 85 2	ip Code
						an of changing	its registered
office or r agent. I a	registered agent, or both, in the State am familiar with, and accept the obliga	of Florida. Such change was auth tions of, Section 607.0505, Florida	orized by a Statutes	the corporat	poration submits this statement for the pulpo- tion's board of directors. I hereby accept the a	appointment as	registered
SIGNATURE					red when (einstating) DA	TE	
12.	Signature, typed or printed name of registered age			nt signature requir	,		
		ID DIRECTORS I	13.		ADDITIONS/CHANGES TO OFFICER	S AND DIREC	CTORS IN 12
THE		ID DIRECTORS	13. 1.1 TITLE		ADDITIONS/CHANGES TO OFFICER	S AND DIREC	
TITLE NAME	DP				ADDITIONS/CHANGES TO OFFICER		
NAME	DP MCCARTY, ROBERT G		1.1 TITLE 1.2 NAME	T ADDRESS	ADDITIONS/CHANGES TO OFFICER		
NAME STREET ADDRESS	DP MCCARTY, ROBERT G		1.1 TITLE 1.2 NAME		ADDITIONS/CHANGES TO OFFICER		
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14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

727-868-1529